



SCHOLARSHIP REPORTING FORM

KU Visitor Center, 1502 Iowa St.
Lawrence, KS 66045
affordability.ku.edu

785-864-4700 (phone)
785-864-5469 (fax)
financialaid@ku.edu

First Name

Last Name

MI

KUID Number

Phone

Email Address

Name of 1st scholarship and/or donor: _____

Total amount of the scholarship (include full amount you expect to receive this academic year): \$ _____

This scholarship should be applied to the following semester or semesters:

- Fall only Spring only Fall and Spring Summer only

All checks must be submitted to FAS for processing. I will submit check: Today At a later date

If you are submitting a check today and it's for fall only, will you be getting another check for spring? Yes No

Specific instructions for the scholarship (e.g. must be full-time): _____

Name of 2nd scholarship and/or donor: _____

Total amount of the scholarship (include full amount you expect to receive this academic year): \$ _____

This scholarship should be applied to the following semester or semesters:

- Fall only Spring only Fall and Spring Summer only

All checks must be submitted to FAS for processing. I will submit check: Today At a later date

If you are submitting a check today and it's for fall only, will you be getting another check for spring? Yes No

Specific instructions for the scholarship (e.g. must be full-time): _____

Name of 3rd scholarship and/or donor: _____

Total amount of the scholarship (include full amount you expect to receive this academic year): \$ _____

This scholarship should be applied to the following semester or semesters:

- Fall only Spring only Fall and Spring Summer only

All checks must be submitted to FAS for processing. I will submit check: Today At a later date

If you are submitting a check today and it's for fall only, will you be getting another check for spring? Yes No

Specific instructions for the scholarship (e.g. must be full-time): _____

Is your name on the Pay to the Order of line of the check(s)? If so you must endorse (sign) the back of the check(s).

STUDENT SIGNATURE

DATE